



State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing
Corporations Section
PO Box 110808
Juneau AK 99811-0808

APPLICATION FOR CERTIFICATE OF CANCELLATION

Limited Partnership

Pursuant to Alaska Statutes, an application for cancellation filed by a limited partnership must state:

1. Name of the limited partnership:

Alaska Entity #:

--	--

2. The date of filing of the certificate of limited partnership:

--

3. The reason for filing the certificate of cancellation:

--

4. The effective date, which must be a date certain, of cancellation if it is not to be effective upon the filing of the certificate of cancellation:

--

5. Other information the general partners filing the certificate determine:

--

The certificate of cancellation shall be signed by all general partners.

Signature of General Partner	Printed Name	Date

Signature of General Partner	Printed Name	Date

Signature of General Partner	Printed Name	Date

Signature of General Partner	Printed Name	Date

Attach an additional page if necessary.

If you have specific legal questions or concerns about this filing, you are strongly advised to consult an attorney or other professional to assist you. Mail the Application for Certificate of Cancellation and the **\$25.00** filing fee (in U.S. funds) to:

State of Alaska
Corporations Section
PO Box 110808
Juneau AK 99801

For additional information or forms please visit our web site at: www.corporations.alaska.gov